

Work Order ID 112887

February-10-14 10:29:27 AM

646.3610

112887

Page 1

Item ID: 646.3610

B112887

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Filler

Start Date: 2/12/14

Start Qty: 5.00

5

Cust Item ID:

Required Date: 2/12/14

Req'd Qty: 5.00

5

Customer:

Reference:

Run Start

NR1

Approvals:

Process Plan: MLJ

Date: 1402-10

Tooling:

Date:

Stop

NR2

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

Draw Nbr

Revision Nbr

646.3600

110

0.00

110

HAAS CNC VERTICAL MACHINING #1

0.00

Mill Conv

Memo

Conventional Milling Machine

1-Machine per DWG
DWG REV: N/C

2- deburr and break all sharp edges

0.00

120

QC2- Inspect parts off machine FAI/FAIB

0.00

120

QC

Memo

Quality Control

MJP
14/04/20
MH 14/04/27

5 X MH 14/04/27

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Item ID: 646.3610 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Filler
 Start Date: 2/12/14 Start Qty: 5.00 *5* Cust Item ID:
 Required Date: 2/12/14 Req'd Qty: 5.00 *5* Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130	QC8- Inspect parts - second check	0.00				5			DAS 25 9-89 144-28
130									
QC	Memo	0.00							

Quality Control

140	Outsource process-Anodize per QSI017 4.1.10.1	0.00							
140									
Outsource4	Memo	0.00							

Outsource process - Anodize

Issue P/O to ATG : 24023

1- Black Anodize as per Dwg 646.3600

2- PRIME AS PER DWG, SEE NOTE #2

Certification of Conformity is required

150	Receive & Inspect for Damage & Mat'l Certs	0.00							
150									
Packaging	Memo	0.00							

Packaging

14/04/30 5

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Item ID: 646.3610 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Filler
 Start Date: 2/12/14 Start Qty: 5.00 *5* Cust Item ID:
 Required Date: 2/12/14 Req'd Qty: 5.00 *5* Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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155	QC5- Inspect part completeness to step on W/O	0.00				S			
155									
QC	Memo	0.00							
Quality Control									

180	Identify as per dwg & Stock Location: <u>8T 523A</u>	0.00							
180									
Packaging	Memo	0.00							
Packaging	***IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV***								

190	QC21- Final Inspection - Work Order Release	0.00							
190									
QC	Memo	0.00							
Quality Control									

5x 14-5-13 DAE 26 9-89
 MJS 14-05-28
 14-5-27

Picklist Print

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Page 1

Work Order ID: 112887

Parent Item: 646.3610

Parent Item Name: Filler

Start Date: 2/12/14

Required Date: 2/12/14

Start Qty: 5.00

Required Qty: 5.00

Comments: IPP REV:A NEW ISSUE 12-10-22 JLM VERIFIED:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M7075T6B1.000X1.000		Purchased	No				f	6.5780		2.0526315			
7075 T6 BAR 1.00 X1.00													

M6061T6B.75X.750

JLM

Location

MAT008

M125872

127216

Loc Qty

6.578

6.578

Loc Code

2.052

JLM

DART AEROSPACE LTD	Work Order:	112887
Description:	Part Number:	646 3610
Inspection Dwg: 646.3600 Rev: N/C		Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

[illegible]

Measured by: <i>MH</i>	Audited by: DAS 25	Preliminary Approval:
Date: <i>11/04/27</i>	Date: 9-89 <i>4-4-28</i>	Date:

Rev	Date	Change	Revised by	Approved
E	10.04.14	Added preliminary approval	KJ	

10.04.15

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

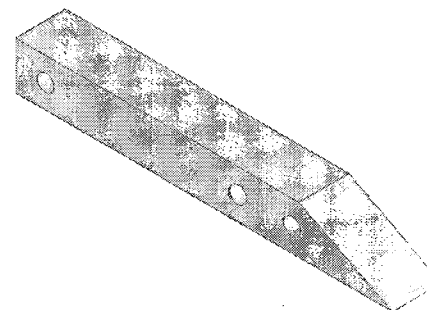
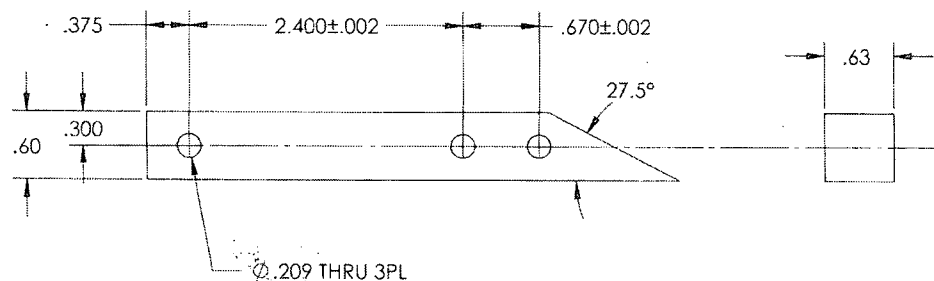
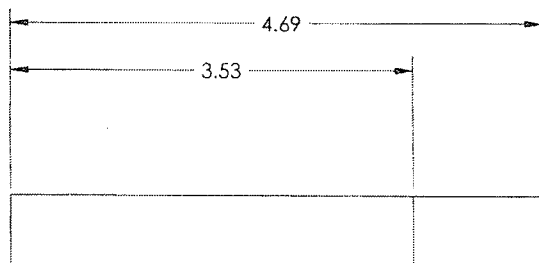
FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence
		<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF APICAL INDUSTRIES. ANY REPRODUCTION IN PART OR WHOLE WITHOUT THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED.

NOTES:

1. MATERIAL: ALUMINUM 6061-T651 PER AMS-QQ-A-250/11
2. FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2, COLOR BLACK; CARDINAL 4860-50 PRETREATMENT PRIMER PRIME IAW MIL-P-23377J TYPE I CLASS N
3. DEBURR AND BREAK ALL SHARP EDGES
4. IDENTIFY IAW MPP-120



646.3610

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 112887 MLJ

1402-10

QTY	FIND #	PART #	DESCRIPTION	MAT'L	SPEC.
		646.3610	FILLER		
PARTS LIST					
NEXT ASSY (S)			APICAL INDUSTRIES		
646.4000			2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300		
			FILLER		
			REV. 1		
			DATE: 07/26/06		
			SCALE: NONE		
			SHEET 1 OF 1		



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

OUTSTANDING PO REPRINT

Purchase Order ID PO24023

Purchase Order Date 4/30/2014

PO Print Date 5/13/2014

Page Number 1 of 2

Order From : VC-ATG001

A.T.G. INDUSTRIES INC.
731 INDUSTRIELLE ROAD
ROCKLAND, ON K4K 1T2
CANADA

Ship To : DART AEROSPACE LTD

1270
ABERD
EEN
HAWKE
SBURY,
ON
K6A
1K7
CANAD
A

REVISED

Contact Name		Buyer	Chantal Lavoie
Vendor Phone	613-446-4544	Customer POID	
Vendor Fax	613-446-4556	Customer Tax #	10127-2607
Ship To Contact		Terms	Net 30
Ship To Phone		Currency	CAD
		FOB	FCA - (Free Carrier)
Ship Method	VENDOR'S TRUCK		
Ship Acct			

Line Nbr	Item ID Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable	Req Qty	Extended Price
5	112887	646.3610 FILLER	5/9/2014 Yes 5/13/2014	5.00	\$33.00
FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N					
Line Total:					\$33.00
6	115190	646.3610 FILLER	5/9/2014 Yes 5/13/2014	10.00	\$66.00
FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N					
Line Total:					\$66.00

5/13/2014



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada
Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 63034

Date: 10-May-14

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description		
15 lot	Part: 646.3610 15 PCS (6.60) <i>5+10</i> HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2 PRIME MIL-P-23377J TYPE I CLASS N PRICE IS PER PIECE Job: 20140284	Rev:	Line:
PO: 24023			
Certificate of Conformance			
A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.			
ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY			
DATE: <i>10/5/14</i>			
CERTIFIED SIGNATURE: <i>[Signature]</i>			
RECEIVER SIGNATURE: _____			